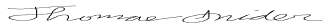


# Retail Food Inspection Report

Floyd County Health Department

Telephone (812) 948-4726

<b>Establishment Name</b> FAIRMONT ELEMENTARY	<b>Telephone Number</b> Est 812-981-7439 Own 812-542-4703	<b>Date of Inspection</b> 08/31/2022	<b>ID#</b>		
<b>Address</b> 1725 ABBIE DELL AVENUE, NEW ALBANY IN 47150					
<b>Owner</b> NAFCS FOOD & NUTRITION SERVICES	<b>Purpose</b> <input checked="" type="checkbox"/> Routine <input type="checkbox"/> Follow-up <input type="checkbox"/> Complaint <input type="checkbox"/> Pre-Operational <input type="checkbox"/> Temporary <input type="checkbox"/> HACCP <input type="checkbox"/> Other (list)	<b>Follow Up</b>	<b>Released</b> 09/10/2022		
<b>Owner's Address</b> 2801 GRANTLINE RD NEW ALBANY, IN 47150-		<b>Menu Type</b> 1 _ 2 _ 3 <u>X</u> 4 _ 5 _			
<b>Person in Charge</b> MARGARIE PLUMBER					
<b>Responsible Person's Email</b> MPLUMMER@NAFCS.ORG					
<b>Certified Food Handler</b> MARGIE PLUMMER					
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C" VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE COLUMN MARKED AS "R"					
<b>Section #</b>	<b>C</b>	<b>NC</b>	<b>R</b>	<b>Narrative</b>	<b>To Be Corrected</b>
<b>Summary of Violations</b> C    _____    NC    _____    R    _____					
Received by (name and title printed): MARGARUE PLUMBER			Inspected by (name and title printed): Thomas Snider CFS		
Received by (signature):			Inspected by (signature): 		
cc:		cc:		cc:	